

CANNON BUILDING 861 SILVER LAKE BLVD., SUITE 203 DOVER, DELAWARE 19904-2467

BOARD OF CHARITABLE GAMING

TELEPHONE: (302) 744-4500 FAX: (302) 739-2711 WEBSITE: DPR.DELAWARE.GOV EMAIL: customerservice.dpr@state.de.us

RAFFLE AFTER OCCASION REPORT

This report must be filed with the Delaware Board of Charitable Gaming within thirty (30) calendar days after the drawing date.

Include with this report the name and address of each person to whom a prize was awarded.

	-	
1.	Name of Sponsoring Organization:	
2.	Permit Number: RE-	
3.	Location of drawing:	
4.	Date of drawing: Time of drawing:	
5.	Number of raffle tickets sold:	<u> </u>
6.	Total gross receipts: (a) Receipts from raffle sales (b) Receipts from food & beverage sales (c) Other receipts (attach description)	\$ \$ \$ TOTAL \$
	Total expenses: (a) Total cost of all prizes (b) Cost of use of event premises (c) Cost of equipment rental (c) Cost of advertising (d) Cost of (raffle) supplies used (e) Cost of bookkeepers or accountants (e) Other expenses (attach description)	\$ \$ \$ \$ \$ \$
7.	NET PROFITS (Subtract TOTAL EXPENSE	, -
8.	Name(s) and address of member(s) in charge:	
9. Purpose(s) for which the event's net proceeds will be used: The state of the event's net proceeds will be used:		s will be used:
		h that all statements in the foregoing report are true and correct and that the soft the laws of this State, the license, and the rules and regulations of this Board
	verning the conduct of such games.	. or the laws of this state, the hoofise, and the fales and regulations of this board
PR	INT NAME OF MEMBER-IN-CHARGE:	
SIG	NATURE OF MEMBER-IN-CHARGE:	

The Qualified Organization must provide Internal Revenue Service form W2-G to the winners of prizes valued at \$600 or more.